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Disability and health-related rehabilitation in international disaster relief

Author(s): Reinhardt JD, Li J, Gosney J, Rathore FA, Haig AJ, Marx M, DeLisa JA,

International Society of P, Rehabilitation Medicine's Sub-Committee on

Rehabilitation Disaster R

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Abstract:

BACKGROUND: Natural disasters result in significant numbers of disabling impairments. Paradoxically, however, the traditional health system response to natural disasters largely neglects health-related rehabilitation as a strategic intervention. OBJECTIVES: To examine the role of health-related rehabilitation in natural disaster relief along three lines of inquiry: (1) epidemiology of injury and disability, (2) impact on health and rehabilitation systems, and (3) the assessment and measurement of disability. DESIGN: Qualitative literature review and secondary data analysis. RESULTS: Absolute numbers of injuries as well as injury to death ratios in natural disasters have increased significantly over the last 40 years. Major impairments requiring health-related rehabilitation include amputations, traumatic brain injuries, spinal cord injuries (SCI), and long bone fractures. Studies show that persons with pre-existing disabilities are more likely to die in a natural disaster. Lack of health-related rehabilitation in natural disaster relief may result in additional burdening of the health system capacity, exacerbating baseline weak rehabilitation and health system infrastructure. Little scientific evidence on the effectiveness of health-related rehabilitation interventions following natural disaster exists, however. Although systematic assessment and measurement of disability after a natural disaster is currently lacking, new approaches have been suggested. CONCLUSION: Health-related rehabilitation potentially results in decreased morbidity due to disabling injuries sustained during a natural disaster and is, therefore, an essential component of the medical response by the host and international communities. Significant systematic challenges to effective delivery of rehabilitation interventions during disaster include a lack of trained responders as well as a lack of medical recordkeeping, data collection, and established outcome measures. Additional development of health-related rehabilitation following natural disaster is urgently required.

Source: http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3160807

Resource Description

Communication: M

resource focus on research or methods on how to communicate or frame issues on climate change; surveys of attitudes, knowledge, beliefs about climate change

A focus of content

Communication Audience: M

audience to whom the resource is directed

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Resource Type: M

format or standard characteristic of resource

Health Professional Exposure: M weather or climate related pathway by which climate change affects health **Extreme Weather Event Extreme Weather Event:** Flooding Geographic Feature: M resource focuses on specific type of geography None or Unspecified Geographic Location: resource focuses on specific location Global or Unspecified Health Impact: M specification of health effect or disease related to climate change exposure Injury Intervention: M strategy to prepare for or reduce the impact of climate change on health A focus of content Medical Community Engagement: M resource focus on how the medical community discusses or acts to address health impacts of climate change A focus of content mitigation or adaptation strategy is a focus of resource Adaptation Population of Concern: A focus of content Population of Concern: M populations at particular risk or vulnerability to climate change impacts Children, Elderly, Low Socioeconomic Status Other Vulnerable Population: Persons with pre-existing disabilities

Page 2 of 3

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Review

Timescale: M

time period studied

Time Scale Unspecified

Vulnerability/Impact Assessment: ₩

resource focus on process of identifying, quantifying, and prioritizing vulnerabilities in a system

A focus of content